

NUMBER:

ISSUE DATE:

SITE RELATED IMPACT _____	
Project or Impact Name	
Scope: Provide details of why the construction will impact the site.	
Impact: Describe who and how the impacted will affect public, staff, departments, support etc.	
Dates of disruption: Start and finish dates of the disruption.	
Time of day: Provide time of day of the disruption	
Map: Provide site map indicating area of disruption.	
Procedures: Describe any operational procedure/protocols which may be impacted. Attach complete Joint Lockout procedure	
All necessary parties notified: FD, City, BCA, Security, Multi-disciplinary Team, managers.	
Other: Provide any other information.	
Signed by:	<i>Construction Company Name</i> _____
	<i>IH Project Manager</i> _____
	<i>Manager, Plant Services</i> _____
	Date Approved: _____